PATENT	APPLICATION	ON FEE DE	ETERMINATION	RECORD
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Effective January 1, 2003

Applicat	ion or Docket Number	
/G	7/18/21	

1101010	09	70	85	1)_
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	CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE (THAN ENTITY
TC	TAL CLAIMS		<u>:</u>				1	RATE	FEE]	RATE	FEE
FC	R		NUMBER I	ILED	NUMB	ER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
тс	TAL CHARGEA	BLE CLAIMS	min	us 20=	*			X\$ 9=		OR	X\$18=	
INC	EPENDENT CL	AIMS	mii	nus 3 =	*	·		X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+140=			+280=	
* If	the difference	in column 1 is	less than ze	ro, enter	"0" in c	olumn 2		TOTAL		OR	TOTAL	
ı	C	LAIMS AS A	MENDED	- PAR	TII		,	TOTAL		Un	OTHER	ΤΗΔΝ
- y		(Column 1)		(Colun	nn 2)	(Column 3)	8	SMALL	ENTITY	OR	SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	* 3	Minus	* 2	01	= -		X\$ 9=		OR	X\$18=	
AME	Independent	* 3	Minus	***	3	=		X42=		OR	X84=	
<u> </u>	FIRST PRESE	NTATION OF MI	JUIPLE DEF	ENDENT	CLAIM			+140=		OR	+280=	
	•			•		•		TOTAL ADDIT, FEE	-	OR	TOTAL ADDIT, FEE	
	Assessment on the recognition of	(Column 1)	PRESS. COLOR DOWNSTONED	(Colum		(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF MU	Minus	***	CLAINA	=		X42=		OR	X84=	
L	TINOTPHESE	WIATION OF MIC	DETIFIE DEF	ENDENT	CLAIN		¹ [+140=		OR	+280=	
							,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colun		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		┚┟					
*	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

PATENT APPL	ICATION FEE	DETERMINATION RECORD	

Application	or	Docket	Number
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		Епесі	tive Octob	er 1, 20	J00		·					
			S FILED - PART I (Column 1)			(Column 2)		SMALL ENTITY TYPE		OR	OTHER TH	
TC	OTAL CLAIMS						RATI	ΞŢ	FEE	7	RATE	FEE
FO	ıR		NUMBER	FILED	NUME	BER EXTRA	BASIC	FEE	355.00	OR	BASIC FEE	
ТО	TAL CHARGE	ABLE CLAIMS	- 0	nus 20=	*		X\$ 9	=		OR	X\$18=	
<u> </u>	DEPENDENT C			ninus 3 =	* 5		X40:	=		OR	X80=	400
MU	LTIPLE DEPER	NDENT CLAIM PI	RESENT				+135	=		OR	+270=	, .
* If	the difference	e in column 1 is	less than ze	ero, ente	r "0" in c	olumn 2	TOTA	,L		OR	TOTAL	1110
	C	CLAIMS AS A (Column 1)	MENDE	D - PAR (Colur		(Column 3)	SMAL	L EI	NTITY	OR	OTHER SMALL I	THAN
		CLAIMS		HIGH	EST				ADDI-	1 [ADDI-
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVIO PAID	OUSLY	PRESENT EXTRA	RATE		FEE		RATE	TIONAL FEE
NDM	Total	. 2	Minus	2	0	= _	X\$ 9:	=		OR	X\$18=	
AME	Independent	ENTATION OF MI	Minus	*** 8	F CLAIM		X40=			OP	X80=	
<u>.</u>	THOTTILO	ZIVIATION OF WIS	JEIN EE DE	PENDEN	CLANV		+135=	=		OR	+270=	
:							TOT ADDIT. F			OR-	TOTAL ADDIT: EEE	
,		(Column 1)		(Colur		(Column 3)				•	1001	
AMENDMENT B	B	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	IBER OUSLY	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	· 3	Minus		10	= -	X\$ 9=	=		OR	X\$18=	
AME	Independent	NTATION OF MU	Minus	***	S CLAIM	=	X40=			OR	X80=)	
	THOTTHEOL	INTATION OF MIC	JLIIPLE DEF	PINDENT	CLAIIVI		+135=	. (OR	+270	
					-		TOTA ADDIT. FE				TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)	AUDIT. 1		-	· ·	ADDII. FEL	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA	RATE	T	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=	X\$ 9=			OR	X\$18=	
ME	Independent	*	Minus	***		=	X40=	1		ŀ	X80=	
	FIRST PRESE	ENTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		740-	-		OR		
* 1	f the entry in colu	umn 1 is less than th	se entry in colu	imn 2 write	"O" in col	lumn 2	+135≐			OR	+270=	<u> </u>
**	If the "Highest Nu	umber Previously Pa	aid For" IN THIS	IS SPACE is	s less that	n 20. enter "20."	TOTA ADDIT. FE			OR A	TOTAL ADDIT. FEE	
j	The Highest Nun	umber Previously Pa mber Previously Paid	d For" (Total or	r Independe	s less thai ant) is the	n 3, enter "3." highest number			priate box			